

Korssakoff's Psychosis.—Fourteen cases (15 punctures). In one case with focal symptoms, there was a lymphocytosis, but cause of it, could not be ascertained—necropsy was refused. (This case should not be included.) In another instance albumen was found but no lymphocytes (the patient was epileptic); 2 cases of alcoholic cachexia and one of acute hallucinosis, the cytological examination was negative. One case of hallucinatory enfeeblement (arterio-sclerosis) lymphocytosis was mildly increased and albumen was not ascertained.

Infective Exhaustive States.—Acute delirium, asthenic delirium, etc. Six cases (7 punctures); in one case albumen was present and in another both lymphocytosis and albumen were demonstrated. The patient suffered from chronic phthisis and was not syphilitic. Autopsy could not explain these findings.

Dementia Præcox.—Thirty-two cases (35 punctures). In two cases lymphocytosis and albumen were found. In one only albumen was present. All these patients were infected with lues. Another case with probable history of syphilis albumen was positive.

One manic depressive insanity—puncture was negative.

Four degenerative psychosis—results were negative.

Three imbecility—also negative.

Nine epilepsy (genuine and traumatic). In 3 lymphocytosis was elicited; one man was positively syphilitic; one woman probably luetic; in the traumatic cases albumen was absent.

The author decries the French method of cytological examination and offers his own. He takes .2 c.cm. of cerebro-spinal fluid and divides it with a fine pipette into four equal parts on four cover slips (10×10 c.cm.) and after drying, fixing, staining, etc., the cover glass is placed in Ehrlich's counting chamber and examined with a microscope. 1–2 cells in a c.mm. is normal; 2–4 cells cannot be regarded pathological; a slightly positive reaction is from 6–10 cells and in general paralysis the cells vary from 6–106. Chotzen maintains that one puncture in doubtful cases is not sufficient. The presence of albumen and lymphocytosis should not be regarded as confirmatory evidences of the disease, but they are only of value in conjunction with other symptoms. The absence of either lymphocytosis or albumen speaks in favor of syphilitic arterio-sclerosis, a cerebral syphilis and tabes with psychosis. In the early stages of syphilis one may find both albumen and lymphocytosis, later either one disappears, and finally both are absent. He discusses the usual precautions one should take in this operation.

The after effects of lumbar puncture are slight and only in 22 of his cases some symptoms were observed. In three patients, however, striking manifestations after the puncture were noticed. One had hysterical paralysis, the second suffered from jactation with slight numbness and the third collapsed because a large quantity of fluid under great pressure was removed, but this was not fatal. In all of them the symptoms were only transient.

KARPAS (Ward's Island).

MISCELLANY.

A NEW CASE OF HYPOPHYSIS OPERATION IN DEGENERATIO ADIPOSE-GENITALIS. v. Eiselberg and v. Frankl-Hochwart (Wiener klin. Wochenschrift, July 30, 1908).

The authors report a case of angiosarcoma of the pituitary body re-

moved by the nasal route, with much improvement in the condition of the patient. This, with a previous case reported by the same authors, and one by Schloffer are the only cases in which this nasal operation has been performed on tumor of the pituitary body with general adiposity and arrest in the evidences of puberty. It has been attempted in acromegaly.

SPILLER.

SEXUAL SCIENCE AND GENERAL MEDICINE. Rohleder (*Journal für Sexualwissenschaft*. 1908. No. 2).

The author considers "the sexual science and its significance for the general practitioner." He deplores the lack of interest and knowledge among general practitioners in every-day sexual questions. It is impossible for the practitioner to familiarize himself with all subjects appertaining to the sexual science. It is very broad and embraces not only the ordinary subjects of the medical curriculum but also zoology, anthropology, ethnology, etc. The author hopes that the day will come when the importance of the subject will be recognized and special chairs of sexology will be endowed. Among the problems to be considered are: The physical processes of puberty—menstruation in the girl and pollution and masturbation in the boy—and the psychic disturbances connected with them, such as hysteria and epilepsy; the sexual life after matrimony, its hygiene, etc., and the sexual life of unmarried people. All these are problems of normal sexual life with which every physician ought to be perfectly familiar. Among the abnormal sexual processes the author mentions dyspareunia (frigidity). He claims that now and then such cases are seen but are not recognized. The main symptoms are flabbiness of the genitals, marked discharge (not gonorrheal), metritis and sterility. Such patients generally go from doctor to specialist and from specialist to professor without any results. Patient is either ashamed to admit that she is frigid *apud coitum* or she is unconscious of it, and only by the intervention of a third—house friend—an orgasm is brought about which cures the dyspareunia and sterility. Thus the sexual drama is brought to a sad ending simply because no doctor thought of that possibility. The neuroses due to excessive sexuality and sexual abstinence should be studied. Erb was the first to recognize the injurious effects of sexual abstinence, and Markuse goes so far as to recommend coitus as a therapeutic agent in unmarried women of the best families. Coitus interruptus is also responsible for many nervous disorders. The author then criticizes the Paragraph 175 of the German statutes.

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